

**BOARD OF SUPERVISORS** 

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"To Enrich Lives Through Effective And Caring Service"

December 29, 2006

To: Supervisor Zev Yaroslavsky, Chairman

Supervisor Gloria Molina Supervisor Yvonne B. Burke Supervisor Don Knabe

Supervisor Michael D. Antonovich

From: Cypthia D. Banks, Director

Community and Senior Services

Bruce Chernof, M.D., Director Department of Health Services

Subject: INTERIM REPORT ON THE ELDER ABUSE PREVENTION

PROGRAM AND FORENSIC CENTER

On June 26, 2006, your Board approved a motion instructing the Director of Community and Senior Services (CSS) and the Director of Department of Health Services (DHS) to provide a joint report within 180 days, including outcome measures and a comprehensive evaluation, on the Elder Abuse Prevention Program and the Elder Abuse Forensic Center.

This is our interim report on program services and outcome measures. A comprehensive review and evaluation will require additional time to determine the effectiveness and efficiency of the services provided. The evaluation portion of this report will be provided to your Board by September 30, 2007. In addition, outcome measures will be enhanced to further quantify our success rate.

# **BACKGROUND**

CYNTHIA D. BANKS Director

The elder abuse medical intervention program was established by CSS Adult Protective Services (APS) to expand the availability of hospital-based early intervention, medical treatment, and forensic services, along with community-based home health services and medical assessments for victims of elder and dependent adult abuse.

The program consists of two components located at two DHS facilities: the Adult Protection Team (APT) component operates out of the LAC+USC Medical Center and the Halting Elder Abuse Response Team (HEART) component is administered at the MLK-Drew Medical Center.

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The current interdepartmental agreement between CSS and DHS for the provision of these services is for the period of July 1, 2006 to June 30, 2007.

# **FUNDING**

The LAC+USC APT and the MLK-Drew HEART components are funded primarily by APS State General Fund monies allocated by the California Department of Social Services (CDSS) to DPSS and, via an intrafund transfer, to the CSS APS program. For the current fiscal year, your Board allocated \$271,000 in County contingency funds to enable the HEART program to operate with full funding. Total CSS funding allocated to DHS for this program is \$915,000.

## SERVICES PROVIDED/OUTCOMES

The Elder Abuse Prevention Program outcome measures include: 1) Increase public awareness of the prevalence of elder and dependent adult abuse; 2) Assessment of elders and dependent adults at risk of abuse, neglect, or self-neglect; and 3) Provision of appropriate services and/or referrals to APS and other needed services.

For the period July 1, 2002 through June 30, 2006, the chart below indicates an overall increase of 21% in number of clients assessed.

Program	FY 2002/03	FY 2003/04	FY 2004/05	FY 2005/06	Total
LAC+USC APT	3354	4376	4789	4917	17,436
MLK-Drew HEART	2176	1771	1316	1776	7,039
Total Number of Clients Served	5530	6147	6105	6693	24,475

LAC+USC APT and MLK-Drew HEART programs have provided the following key intervention services for the period July 1, 2006 through November 30, 2006:

### LAC+USC APT Program

In addition to assessing and treating patients in the emergency room and on an inpatient basis at the hospital, the APT program also assesses and treats patients in the facility's geriatric out-patient clinic and performs in-home assessments on cases referred by APS. Patients are referred for services such as occupational therapy, dietician assessment, pharmacist assessment, home health care, mental health treatment and referrals to the Office of the Public Guardian, when indicated. Each Supervisor Elder Abuse Prevention Program Page 3

- 2,022 elders/dependent adults were personally interviewed to assess the individual's risk of abuse, neglect, or self-neglect;
- 142 were identified as suffering from abuse or neglect by another, and in some cases, suffering from self-neglect as well, and were provided appropriate services and/or referrals; and
- 459 medical professionals were provided in-depth training on how to identify abuse/neglect, how best to intervene to assist the victim, and how to report the situation to APS or law enforcement.

MLK-Drew Medical Center Halting Elder Abuse Response Team (HEART)
HEART assesses and provides treatment to patients at MLK-Drew Medical Center, in the emergency room, and also at the Hubert H. Humphrey Comprehensive Health Center. As with the APT program, patients are referred to services such as occupational therapy, dietician assessment, pharmacist assessment, home health care, mental health services, and referrals to the Office of Public Guardian, when indicated.

- 697 elders/dependent adults were personally interviewed to assess the individual's risk of abuse/neglect, including self-neglect;
- 92 were identified as suffering from abuse or neglect by another, and in some cases, suffering from self-neglect as well, and were provided appropriate services and/or referrals; and
- 102 medical professionals were provided in-depth training on how to identify abuse/neglect, how best to intervene to assist the victim, and how to report the situation to APS or law enforcement.

Included in the MLK-Drew Medical Center HEART program is a Gatekeeper Abuse Assessment and Prevention Project (GAAP). GAAP services are provided through a subcontract with Drew University which was approved by your Board on December 19, 2006. Services planned through the sub-contract include developing a training video on the prevention of elder abuse and how to report it, public service announcements, inhome pharmacist assessments of medication, in-home dietician evaluations of diets, transportation services, medication delivery, medical social workers to coordinate multidisciplinary in-home assessments, and the formation of Elder Abuse Task Forces and Focus Groups.

#### Elder Abuse Forensic Center

In January 2006, the LAC+USC APT component was expanded to include the Los Angeles County Elder Abuse Forensic Center. This center is the operational base of a

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multidisciplinary team that provides expertise and comprehensive in-depth case analysis, consultation and recommendations on the handling and prosecution of elder and dependent adult abuse cases.

The Los Angeles County Elder Abuse Forensic Center was funded initially through use of APS funds in the amount of \$172,000. Funding for the current fiscal year is totally from private funds, namely, the Archstone Foundation and the Uni-Health Foundation. The grand opening for the Center will take place on January 24, 2007 in the newly renovated Santana building at LAC+USC.

Core team members include a geriatrician, a neuropsychologist, as well as representatives from the District Attorney's office, the City Attorney's office, law enforcement, APS, the Victim-Witness Assistance Program, Office of the Public Guardian, and GENESIS. Additional team members include the Office of the Coroner, the Ombudsman, Bet Tzedek Legal Services, and Regional Center representatives.

From July to November 2006 the center reviewed 67 cases, and provided medical evaluations and neuropsychological assessments when indicated along with multiple community referrals. The center made 12 referrals to the Public Guardian, granted five temporary conservatorships, one permanent conservatorship, and submitted three misdemeanor and seven felony filings, with one successful prosecution.

## PROGRAM EVALUATION

During this fiscal period, APT, HEART, and the Forensic Center has been a highly valuable resource in our efforts to respond to the problem of elder and dependent adult abuse. However, a very significant component of the MLK-Drew HEART program (GAAP) began implementation on December 19, 2006. To provide a more comprehensive review and evaluation of the program, adequate time is required. The additional time will allow us to measure the results of all activities on effectiveness and efficiency and determine what services yield the most positive impacts.

CSS and DHS will continue to monitor the services provided by APT, HEART and the Forensic Center and return to your Board by September 30, 2007 with the program evaluation portion of this report.

If you have any questions or need additional information, we are available to meet with you or your staff.

CB:BAC:rd

c: David E. Janssen Sachi A. Hamai